

**APPLICATION FOR IAHCE SCHOLARSHIP**

Please type or print. The completed application must be postmarked by May 1 and sent to the IAHCE Secretary whose name is listed on page 1 of the Guidebook or on the [www.iahce.org](http://www.iahce.org) website.

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_  
          Last    First    Middle

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

County: \_\_\_\_\_ Name of Unit: \_\_\_\_\_

Home Telephone Number (\_\_\_\_) \_\_\_\_\_ e-mail \_\_\_\_\_

IAHCE Membership Verification:

IAHCE Member Name \_\_\_\_\_ Number of Years \_\_\_\_\_

\_\_\_\_ Self \_\_\_\_ Parent \_\_\_\_ Grandparent

\_\_\_\_ Current Member 3 + Years in Good Standing

County Verification by Current County Officer:

Name \_\_\_\_\_ Office \_\_\_\_\_

State Board Verification:

State Secretary \_\_\_\_\_

Please attach a recent photo to this page.

**APPLICATION FOR IAHCE EDUCATIONAL SCHOLARSHIP**

(Additional sheets may be used)

How many years have you or your family member been a member of IAHCE?: \_\_\_\_\_

List names of High School (s) or college (s) attended and number of years each: \_\_\_\_\_

\_\_\_\_\_  
Name & Address of college you plan to attend: \_\_\_\_\_

\_\_\_\_\_  
Name of course of study or major you plan to take: \_\_\_\_\_

What license, certificate or degree is granted on completion?: \_\_\_\_\_

What are your employment goals/plans?: \_\_\_\_\_

Will you be considered a full time student by the college you attend? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you received this scholarship before? Yes \_\_\_\_\_ No \_\_\_\_\_

Please attach the mostcurrent grade transcript.

List other Honors and awards received: \_\_\_\_\_

\_\_\_\_\_  
List School Activities: \_\_\_\_\_

List Community/ Church Activities: \_\_\_\_\_

\_\_\_\_\_  
List Your Work Experiences: \_\_\_\_\_

Attach two non-family letters of recommendation.

Attach a short essay/resume (approximately 150 words) stating your educational goals and how this scholarship will help you attain these goals.

If IAHCE member, list all HEA/HCE offices held in Unit, county or state level: \_\_\_\_\_